

EMERGENCY FINANCIAL ASSISTANCE

Effective Date: 11-07-2020

I. PURPOSE

The purpose of this Standard Operating Procedure is to provide coordinated and standardized guidance regarding Emergency Financial Assistance service category, in accordance with HRSA/HAB standards.

II. DEFINITION

Ryan White Part B is a source of funds provided by the United States Department of Health Resources and Services Administration (HRSA). Emergency Financial Assistance is the provision of short-term payments to agencies or establishment of voucher programs to assist with emergency expenses related to essential utilities housing, food (including groceries, food vouchers, and food stamps), or transportation, and medication not covered by an AIDS Drug Assistance Program or AIDS Pharmaceutical Assistance, or another HRSA RWHAP-allowable cost needed to improve health outcomes. Emergency financial assistance can occur as a direct payment to an agency or through a voucher program.

III. PROGRAM GUIDANCE

Emergency Financial Assistance (EFA) is provided in the form of short-term payments to agencies or establishment of voucher programs to assist with Emergency financial assistance.

Direct cash payments to clients are not permitted. It is expected that all other sources of funding in the community for emergency financial assistance will be effectively used and that any allocation of RWHAP funds for these purposes will be as the payer of last resort, and for limited amounts, uses, and periods of time. Continuous provision of an allowable service to a client should not be funded through emergency financial assistance.

All service provision will comply with the Alabama Department of Public Health and Health and Human Services (HHS) Guidelines and HRSA/HAB Division of State HIV/AIDS Programs National Monitoring Standards and the Office of HIV Prevention and Care Direct Care Service and Management Branch Service Standards for people with HIV, including the following:

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1.0 Key Services Components and Activities

National Monitoring Standards: Support for Emergency Financial Assistance (EFA) for essential services including utilities, transportation, housing, and food (including groceries, food vouchers, and food stamps), or medications, provided to clients with limited frequency and for limited periods of time, through either: a) Short-term payments to agencies and/or b) Establishment of voucher programs. Note: Direct cash payments to clients are not permitted.

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Standard	Measure
Documentation	
1.1) Emergency funds are allocated, tracked and reported by type of assistance to include: <ul style="list-style-type: none"> • Number of clients and amount expended for each type of EFA • Summary of number of EFA services received by client • Methods used to provide EFA (e.g., payments to agencies, vouchers). 	1.1) Documentation of EFA provided by type of assistance.
1.2) Client record must contain, at a minimum: <ul style="list-style-type: none"> • Need for EFA • Type(s) and date(s) of EFA provided • Method of providing EFA (e.g. vouchers, payment to agencies). Note: Direct cash payment to client is not permitted. All reports must be signed and dated. 	1.2) Signed and dated reports verifying need, documenting assistance provided and method of providing EFA in the client's record.
Assessment/Service Plan/Provision of Services	
1.3) A request for EFA needs to be completed prior to the provision of assistance	1.3) Documentation of request for EFA in the client record signed and dated.
1.4) A brief needs assessment for case management services is to be completed prior to the provision of assistance.	1.4) Documentation of needs assessment for case management services in client's record signed and dated.
1.5) For those clients determined to need case management services, develop an emergency assistance plan within 24 hours of providing emergency assistance.	1.5) For clients in need of case management services, documentation of emergency assistance plan signed and dated.
1.6) Review the emergency assistance plan and reassess needs every 30 days for 3 months.	1.6) Emergency assistance plans reassessed every 30 days in client's record signed and dated.
1.7) Provide Emergency Financial Assistance (EFA) for essential services including: <ul style="list-style-type: none"> • Utilities • Housing (Emergency Housing 1-14 days and Short-term Housing 15-30 days) • Transportation • Food (including groceries, food vouchers, and food stamps) • Non-ADAP formulary medications. Note: Brand name formulations may be paid for with Ryan White funds only if generic formulation is not available 	1.7) Documentation of assistance provided for essential services with frequency and duration outlined in client's record signed and dated. Note: Total amount of assistance for any one client will be based on need, financial status and eligibility for other public benefits. ADPH limits a total of \$800.00 to \$1,800.00 per client per calendar year and/or 2 (EFA) referrals within a measurement year.

2.0 Quality Management

National Monitoring Standards: Implement a Clinical Quality Management Program (CQM) to include: a) written QM plan; b) quality expectations for providers and services; c) method to report and track expected outcomes; d) monitoring of provider compliance with HHS treatment guidelines and Part B Program's approved Standards of Care.

Standard	Measure
2.1) Measure and report client health outcomes using Emergency Financial Assistance service measures approved by ADPH.	<p>2.1) Performance measurement data on the following indicators:</p> <ul style="list-style-type: none"> • Percentage of persons living with HIV and receiving Emergency Financial Assistance services, regardless of age, who will have at least two care markers in a 12-month period that are at least 3 months apart (Care marker defined as evidence of a HIV medical care visit date, a CD4 count and test date, a viral load value and test date, and/or an antiretroviral medication prescription and date). • Percentage of people enrolled in RW Part B-funded Program living with HIV and receiving Emergency Financial Assistance, regardless of age, who will have an HIV viral load less than 200 copies/mL at last HIV viral load less than 200 copies/mL at least HIV viral load test during the measurement year
2.2) Client will be approved for (EFA) within 15 days from date of referral. Based upon eligibility requirements, needs assessment and payment type (Vouchers or payment to agencies).	2.2) Percentage of people enrolled in RW Part B-funded Program living with HIV evaluated and receiving Emergency Financial Assistance, regardless of age, who will be approved for EFA with 15 days of initial contact with client

3.0 Personnel Qualifications (including licensure)

National Monitoring Standards: Licensure and registration of the case manager as required by the State in which the service is provided.

Standard	Measure
3.1) Case management/ MCM must have appropriate and current licensure as required by the State of Alabama. ^{viii}	3.1) Documentation of qualifications and current licensure in personnel file.

<p>3.2) MCM must complete 12 hours of continuing education in HIV/AIDS treatment or care annually.</p>	<p>3.2) Documentation of required continuing education in personnel file:</p> <ul style="list-style-type: none"> • Must possess a working knowledge of the RWHAP Part B Core and Support Services Categories and updates to the policy as delineated in PCN 16-02 for allowable use of Part B Service Funds. Emergency Financial Assistance (EFA). • Must also possess and maintain current knowledge of local, state and federal programs and resources and how to access these programs to include (i.e. utilities, housing, food, transportation and Non-ADAP medication assistance).
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Resources:

HRSA/HAB Ryan White HIV/AIDS Program Services: Clarifications on Eligible Individuals & Allowable Uses of Funds Policy Clarification Notice (PCN) #16-02 (Revised 10/22/18).

HRSA/HAB Division of State HIV/AIDS Programs National Monitoring Standards—Program Part B (April 2013).

HRSA/HAB Ryan White HIV/AIDS Program Services: Clarifications on Ryan White Program Eligibility Determinations and Recertification Requirements Policy Clarification Notice #13 -02

Public Health Service Act; Sections 2605(a) (6), 2617 (b) (7) (F), 2664 (f) (1), and 2671 (i).

National Standards for Culturally and Linguistically Appropriate Services (CLAS) in Health and Health Care. Available at: <https://www.thinkculturalhealth.hhs.gov/assets/pdfs/EnhancedNationalCLASStandards.pdf>